PTO/SB/21 (09-06)
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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number 10/826,522-Conf. #2890 Filing Date April 16, 2004 First Named Inventor Geert Karel Maria Plaetinck Art Unit 1633 **Examiner Name** Quang Nguyen Attorney Docket Number D0590.70011US02

	EN	ICLOSURE	S (Check all	that app	oly)				
X Fee Transr	mittal Form	Drawing((s)		After Allowance Communication to TC				
X Fee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences				
X Amendment/Reply		Petition	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After	r Final	Petition to Convert to a Provisional Application			Proprietary Information				
Affida	lavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter				
x Extension	of Time Request	Terminal	I Disclaimer		X Other Enclosure(s) (please Identify below):				
Express Al	bandonment Request	Reques'	st for Refund		Check in the amount of \$850.00 Return Receipt Postcard				
Information	n Disclosure Statement	CD, Num	mber of CD(s)						
Certified Control Document	Copy of Priority (s)	Lar							
Reply to Missing Parts/ Incomplete Application		Remarks	The following amounts are included in the payment filed herewith: \$550.00 for the difference in small and large entity claims fees (in October 18, 2005 Amendment); \$180.00 for the difference in small and large entity multiple dependent claims fees (in October 18, 2005 Amendment); \$120.00 for a one month extension of time for the present response.						
	ly to Missing Parts under CFR 1.52 or 1.53								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name	WOLF, GREENFIEL	D & SACKS	i, P.C.						
Signature	Signature Jan Constitut								
Printed name	John R. Van Amster	rdam							
Date	May 3, 2007			Reg. No.	40,212				
Certificate of Mailing Under 37 CFR 1.8(a) I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Dated: May 3 2007 Signature: (Sylvana Householder)									

PTO/SB/17 (02-07)

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Inder the Paperwork Reduction A	ct of 1995, no pe	erson are required to	respond to a collect		mplete if Know							
Effective on 1.		+ 200E (U D 4040)	Application No.	T	10/826,522-Cd							
	`			April 16, 2004	711. #2000							
FEE TRAN	IAL	First Named In		Geert Karel Maria Plaetinck								
For FY		Examiner Nam		Quang Nguyen								
Applicant claims small entity	7 CER 1 27	4000										
	74t Onit											
TOTAL AMOUNT OF PAYMEN	850.00	Attorney Docke	Attorney Docket No. D0590.70011US02									
METHOD OF PAYMENT (check all that apply)												
x Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION												
1. BASIC FILING, SEARCH, AN												
ì	FILING FE		ARCH FEES		NATION FEES							
Application Type Fe		<u>l Entity</u> e (\$) Fee (Small Entity 5) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)						
Utility 3	300 1	50 500	250	200	100							
Design 2	200 1	00 100	50	130	65							
Plant 2	200 1	.00 300	150	160	80	,						
Reissue 3	300 1	50 500	250	600	300							
Provisional 2	200 1	.00	0	0	0							
2. EXCESS CLAIM FEES						Small Entity						
Fee (\$) Fee (\$)												
Each claim over 20 (including Reissues) 50 25												
Each independent claim over 3 (including Reissues) 200 100												
Multiple dependent claims 360 180												
Total Claims Extra Claim	s Fee (\$	<u>Fee</u>	Paid (\$) Multiple Dependent Claims			ent Claims						
54 =	×	=		E	ee (\$)	Fee Paid (\$)						
HP = highest number of total claims pa			Daid (A)									
Indep. Claims Extra Claim 2 -6=	s Fee (\$) <u>Fee</u>	Paid (\$)									
HP = highest number of independent c	laims paid for, if	greater than 3.										
3. APPLICATION SIZE FEE	1.10				~	,						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra S			additional 50 or fr		of Fee (\$)	Fee Paid (\$)						
- 100 =			_ (round up to a w			=						
4. OTHER FEE(S)						Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 1202 Claims fee and multiple dependent claims fee (make up 730.00 payment)												
			esponse within	first mont	<u>h</u>	120.00						
SUBMITTED BY / /	/ /)										
Signature Shun R_	Van In	of the	Registration No. (Attorney/Agent)	40,212	Telephone	(617) 646-8000						
Name (Print/Type) John R. Van Amsterdam Date May 3, 2007												
Codificate of Mailing Linder 37 CED 4 9/a)												
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the date shown below with sufficient postage as First Class M ail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.												
Dated: Nay 3 2007 Signature: Sylvaethyddom (Sylvana Householder)												
Dated:												